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\*\* CONTINUING DATA \*\*\*\*\* *None -003*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None -003*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Cheri Battell</i> Examiner's Signature	Initials			

## ADDRESS

28395

## TITLE

BATTERY SUPPORT STRUCTURE

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